ACCEPTANCE AND WAIVER RE: STATEMENT IN LIEU

STATE OF CONNECTICUT

RECORDED:

(Date)

OF ACCOUNT

PC-244 (BBS) NEW 10/98

COURT OF PROBATE

[Type or print in black ink.]

TO: COURT OF PROBATE, DISTRICT OF

DISTRICT NO.

ESTATE OF

			, DECEASED
The undersigned, a distribu	itee of the above estate,	hereby represents that I:	
l have received a copy of	the Statement in Lieu o	of Account for the above estate;	
I understand that Stateme	nt and have no objectio	n to any of the expenses or distri	butions shown thereon;
understand that I could and request the court to		ounting from the fiduciary(ies), being;	ut I believe it is unnecessary
		g before this court, but I waive n Lieu of Account as filed; and	ny right to a formal hearing
I acknowledge my right to	o consult with legal cou	nsel.	
Signature	(Date)	Signature	(Date)
Print Name		Print Name	
Signature	(Date)	Signature	(Date)
Print Name		Print Name	
Signature	(Date)	Signature	(Date)

Print Name

Signature

Print Name

Please notify the court of any change of address.

(Date)

Print Name

Signature

Print Name